

TRICARE *Europe*

COMPASS

TRICARE Europe
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The TRICARE Europe Compass is published quarterly by the office of the Lead Agent. If you have any questions or concerns, or would like to see specific articles or information in the COMPASS, please contact LTC Bea Stephens, TRICARE Europe Public Affairs Officer, at DSN 496-6325 or civilian (49)-(0) 6302-67-6325 or email: teo.pao@sembach.af.mil. Comments, suggestions and article submissions are welcome.

From the Director...

By **CAPT Cindy DiLorenzo**
TRICARE Europe Deputy Director

The passage of the FY 2001 National Defense Authorization Act (NDAA) in October 2000 has had significant impact on the Military Health System and each of you. As you all are very aware, funding for the provisions authorized by the FY 2001 NDAA has been a significant issue and is still not fully resolved.

As we move closer to the 1 October 2001 implementation date for "TRICARE for Life" for our beneficiaries over the age of 65, each of you have been asked to identify a plan for "enrolling" these beneficiaries into "TRICARE Plus". On 22 June 2001, Dr. Clinton signed out a "Policy Memorandum to Refine the Policy for Access to Care in Medical Treatment Facilities and Establish the TRICARE Plus Program".

The "TRICARE Plus Program" comes with no additional funding and no additional staff. It is a Program designed to "enroll" certain beneficiaries, not eligible previously to a Primary Care Manager in the MTF and provide continuity of care for these individuals. Each Service has established guidelines for their MTFs to use in determining their capacity and capability to "enroll" beneficiaries into "TRICARE Plus".

The intent of the "TRICARE Plus" Program is to utilize excess capacity inside the MTFs and to provide quality, cost effective healthcare to those beneficiaries previously seen on a "space available" basis only. Each of you will face unique challenges in implementing the "TRICARE Plus" Program.

The TRICARE Europe Office and your Service Managed Care Officers are available to assist your organization with this implementation. The TRICARE Europe Office staff is in communication with the TRICARE Management Activity on a routine basis to address any issues or questions you may have. Please do not hesitate to contact us.

The "TRICARE Plus" Program provides the Military Health System and each of you the opportunity to provide quality healthcare to those who have come before us, those that faithfully served our country and continue to support our Flag and our Constitution. The TRICARE Europe Office staff is excited and proud to be part of this endeavor! +

Stateside Mental Health Inpatient Referrals

By LtCol Liz Robison, Director, Population Health

In the last COMPASS the mental health authorization process for OCONUS was addressed. This article addresses if care at a CONUS facility is the best option and outlines the process to obtain authorization for such care. The process outlined is only for beneficiaries enrolled in TRICARE Europe Prime.

Stateside inpatient mental health referrals have more options for levels of care. A basic understanding of these levels is important to help facilitate the referral process, thus providing the best option to meet the needs of the beneficiary. There are four levels of care for inpatient mental health:

One of the primary levels of care is acute inpatient which allows for stabilization and transition to the next level of care. In most cases, the beneficiary needing acute care requires some stabilization in an OCONUS treatment program to ensure safe transport to a stateside facility. The next three levels of care require facilities to have a TRICARE certification. The certification is a specific process facilities must go through in order to be recognized by TRICARE. Colorado Foundation for Medical Care (CFMC), the contractor that oversees the application process for TRICARE Management Activity (TMA), issues the certifications. Updated listings of which facilities are certified can be found on the following website:

<http://webserver.europe.tricare.osd.mil/main/PAO/policies/TRICARECertFacList-June2901.pdf>.

What are the types of programs requiring certification?

- Partial hospitalization program (PHP)– For beneficiaries requiring a structured program for longer periods than outpatient programs offer. The program allows the patient to be integrated within a home setting.
- Residential Treatment Center (RTC) – This benefit is for child/adolescent age groups. The focus for RTC programs is to provide a structured, therapeutic environment for treatment of mental disorders.
- Substance use detoxification/rehabilitation facility (SUDRF) – focuses on the inpatient treatment for those needing care related to the misuse of alcohol or drugs. These facilities must meet specific requirements outlined by TRICARE.

Once the provider determines the level of care, the next step is securing the authorization. TRICARE Overseas Program (TOP) has the benefit of a stateside mental health review contractor to assist with the authorization process. The current contractor is Choice Behavioral Health Partnership (CHBP), who is a subcontractor for Humana Military Healthcare Service (HMHS), now the Managed Care Support Contractor for several regions.

CBHP's primary role is to review the provider's medical documentation, determine appropriateness in level of care, and to ensure the request is a TRICARE benefit.

To assist with the documentation needs, CBHP, in partnership with TEO, developed a military specific RTC referral form. A provider requesting a level of care other than RTC needs to submit medical documentation to support the request for admission to either acute, PHP, or SUDRF. The turn around time for authorization verification is less than 24 hours (duty day) if all information is complete. CBHP personnel have also assisted (when requested) in locating a facility and provider willing to accept the patient referral. This is not a requirement of CBHP and therefore there is no requirement for this information to be provided back to the requesting party. This is important to understand, since CBHP is providing this service to assist our providers in making contact with a stateside facility recognizing that time differences are constraining factors in trying to secure an accepting facility and provider.

To assist families with understanding what it takes to go to a stateside inpatient mental health facility, TEO developed a pamphlet that briefly outlines the process. This pamphlet is available on TRICARE Europe's website:

<http://webserver.europe.tricare.osd.mil/main/PAO/Brochures/mentalhealthbrochure.doc>.

One additional resource available for stateside care for inpatient acute adolescent cases is through the National Naval Medical Center (NNMC), Bethesda. NNMC has a small inpatient acute mental health unit for adolescents. Due to the size and staffing, acceptance of referrals outside of their Region is limited, but may be an option to explore for certain beneficiaries. An inpatient referral to NNMC does not require authorization through CBHP. If the beneficiary is recommended to continue care in a civilian stateside facility after the admission at NNMC, then CBHP will need to be engaged. To contact the inpatient unit for further information call (303) 295-4095 or DSN 312-295-4095.

Continued on page 3

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One major consideration in processing any family member for stateside care is to consider whether it would be in the best interest of the family to seek an early return of dependents or Exceptional Family Member Program (EFMP) reassignment back to CONUS. The importance of this step is to ensure the patient is afforded the opportunity for close aftercare follow-up once discharged from a high intensity program like inpatient mental health.

Most of our MTFs cannot support the intensive outpatient follow up that is required after an inpatient episode of care, especially if there are long term issues. Additionally, adolescents being referred many times are faced with the same issues and limited support if returning to the OCONUS environment after RTC level of care. RTC care requires family involvement, though available telephonically, it is difficult to maximize the therapeutic value via this mode. If RTC level of care is being considered then our medical community will engage to require the member to work reassignment.

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Spotlight on 39th Medical Group, Incirlik, Turkey

One of the primary purposes for publishing the TRICARE Europe COMPASS on a quarterly basis is to share TRICARE and TRICARE Europe Regional information among and with the TRICARE Europe Military Treatment Facilities (MTF). We think one way to build a better understanding of our Region is to shine the "spotlight" on one of our MTFs each quarter. We hope by doing so, each of you reading the COMPASS will have a better understanding of the challenges this Region faces, the complexities of the various MTFs, and the various missions the TRICARE Europe MTFs perform on a daily basis.

In this issue we will be shining our "SPOTLIGHT" on the 39th Medical Group, Incirlik, Turkey. The 39th MDG sits in the middle of the Incirlik Air Base - did you know that the Air Base is owned by the Turkish military? If you have never been to Incirlik, your first thought is that there are no American Flags flying outside. We were told the American Flag is flown only on special occasions. As you enter the Base, you need to show not only your military identification but also a base pass issued to you by the Turkish military.

You ride through the gate, which is protected by sandbags and the Turkish military with semi automatic weapons. As you pass - you realize that the U.S military assigned to Incirlik really are at the "tip of the spear".

Your first night - you wake to the sounds of the planes taking off to enforce the "no fly zone" over Iraq. You quickly realize the MTF has much more to deal with then just the daily business of taking care of airmen and their families. The 39th MDG is in the heart of Northern Watch - they take care of the men and women who daily risk their lives to ensure peace is maintained in that part of the world.

The 39th MDG is a hardened facility - meaning it can be "buttoned up" in the event of a chemical attack. It is one of two Air Force MTFs with that capability. Once "buttoned up", it can sustain itself for seven days. It can expand to 180 beds and has a decontamination area for patients in the event of a chemical attack. On a tour though the facility, you are acutely aware of the sense of purpose the MTF staff have - they are there to ensure the health and readiness of the soldiers, sailors, marines, and airmen deployed to Incirlik in support of Northern Watch.

We applaud the commitment, dedication, and professionalism of the staff of the 39th Medical Group, Incirlik, Turkey. Your sense of duty to taking care of those protecting the peace of the region is remarkable. The "SPOTLIGHT" is yours!

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39th Medical Group Clinic-Incirlik, Turkey

Your Personal Breast Health: Website Updates

By Maureen Sherman
Breast Health Program Manager

TRICARE Europe's
Breast Health
Awareness Program



One source of consolidated information related to breast health can be found at the website maintained on the TRICARE Europe homepage: <http://webserver.europe.tricare.osd.mil/>. A recent "clean-up" of the website allowed us opportunities to update web addresses and delete duplicate information, streamlining the viewer's choices in targeting sites that provide comprehensive information under the various topic headings identified.

One of the general topic areas, "Information and Resources," will soon include information from our database that was mentioned in last quarter's "COMPASS." This new information is targeted to assist breast cancer patients, providers, and, Breast Cancer Initiative POCs.

Additionally, the site has a variety of links identified which provide education on breast health care. Information that can be found includes: breast lumps, emotional support, pain management, and a variety of other topics. A key feature for those recently diagnosed with breast cancer is the link to the "Breast Cancer Decision Guide," which is an interactive website where patients can enter their diagnosis and staging and obtain a listing of possible treatment options. Empowering consumers with knowledge allows those impacted by breast health issues to take a proactive role in their healthcare and treatment plan options.

An upcoming focus will be adding information to "Support Group" and "Military Resources & Services" areas. Currently, the "Support Group" provides a listing of online support groups and a survivor's forum with a discussion board. The "Military Services" area will add information about how to make a referral to a host nation facility specializing in lymph-drainage programs as well as some information on suppliers of wigs and prosthesis.

The TRICARE Europe link to breast health information is continually evolving, as new sites and information become available. Please feel free to contact TRICARE Europe's Breast Cancer Initiative Coordinator with any new ideas or suggestions to make this website a useful source of information. Email: maureen.Sherman@sembach.af.mil. +

Infertility Treatment

By LTC Beatrice Stephens
Director, Health Plan Evaluation

In the last Compass, we informed our readers that we would feature an article with each publication about the "benefit". This quarter, we will discuss infertility treatment. This is another topic that our office receives many inquiries about from our beneficiaries. The major concern is whether or not TRICARE will pay for infertility treatment if a patient exhausts the conventional therapies and is referred outside the MTF for any artificial reproductive techniques.

According to the TRICARE Policy, Chapter 3, Section 12.1, Para III (A) and IV the definition of infertility is the failure to achieve conception by couples who have not used contraception for at least one year. The most common causes are: hormone imbalance, blocked fallopian tubes, and low sperm count.

There are different types of infertility treatment options: conventional and artificial reproductive techniques. Conventional therapies include diagnostic services such as lab tests and radiology tests. Drug treatment is another conventional therapy that usually includes hormone supplements. The surgical repair of reproductive organs i.e. blocked ovaries is another conventional therapy that is utilized. All of the conventional therapies noted above are a TRICARE covered benefit.

Artificial reproductive techniques include the following: intrauterine insemination, artificial insemination, gamet intrafallopian tube transfer (GIFT) and in vitro fertilization (IVF). All of these techniques are not covered by TRICARE to include reversal of a surgical sterilization procedure and all other non-coital reproductive procedures. Additionally, any costs for services and supplies provided in conjunction with the above procedures or any costs related to donors and semen banks are also excluded. TRICARE will cover services and supplies required in the diagnosis and treatment of illness or injury involving the female genital system. +

WISCONSIN PHYSICIAN SERVICES

The overseas claims processor, Wisconsin Physician Services (WPS) offers toll-free numbers in several European countries for TRICARE Service Center staff to reach them. Current WPS numbers are:

Germany	0800-1-8-23215
Italy	800-8-75982
United Kingdom	0800-966057

CONUS number (toll-call)	608-224-2727
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Meet the TRICARE Europe Office Staff

Welcome to this new **"corner of the COMPASS"**. Our intent is for you to meet members of the TRICARE Europe Office staff. We will **HIGHLIGHT** members of our staff in each publication of the COMPASS - sometimes we will **HIGHLIGHT** individuals and sometimes we will **HIGHLIGHT** a Division. In this publication - we have decided to **HIGHLIGHT** an individual and a Division - so read on to **MEET the TRICARE Europe Office staff!**

COL Robert (Bob) Larsen - TRICARE Europe Medical Director

COL Larsen, an Army Family Physician, is the TRICARE Europe Medical Director. As our Medical Director, COL Larsen provides a clinical perspective to the administration of the TRICARE Europe Health Plan. He actively supports the optimization of clinical components of the health plan for both the direct and purchased care arenas. COL Larsen joined the U.S. Army in 1985 after 5 years in solo practice in Erie, Pennsylvania. He has held a multitude of clinical and leadership positions during his time on active duty. His assignments have included staff family physician, Chief of Family Practice, Clinic Commander, Chief of Primary Care, and Commander of a Medical Support Company for an Armored Brigade in Desert Storm. COL Larsen is Board Certified in Family Medicine and is a member of the American Academy of Family Practice and the European Society for the Philosophy of Medicine and Health Care. He currently has clinical privileges and is an affiliate staff member at Landstuhl Regional Medical Center.

As the Medical Director for TRICARE Europe, COL Larsen represents the Region on various committees and working groups at the TRICARE Management Activity level. His initiative and efforts were instrumental in this Region implementing the "Open Access Pilot Study". A strong proponent of TRICARE, COL Larsen consistently works towards ensuring that our beneficiaries receive quality, cost effective health care. We are most fortunate to have COL Bob Larsen as a member of the TRICARE Europe Office.

The TRICARE Dental Program Division

The TRICARE Dental Program Division is an integral part of the TRICARE Europe Office. The Division is staffed by Dr. George Schad and Ms. Anne Beauchamp. These two individuals are responsible for the oversight and management of the TRICARE Dental Program throughout the TRICARE Europe Region.

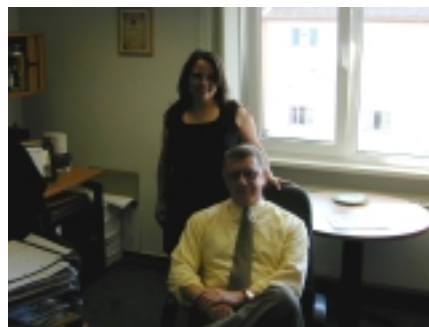
Dr. Schad, a retired Air Force Colonel, is a dentist. Upon graduation from the Indiana School of Dentistry in 1968, he entered the Air Force, where he served for 30 years in a variety of clinical and leadership positions.

Hired as the Director of the TRICARE Dental Program in July 1999, Dr. Schad has been instrumental in the development and implementation of the Program.

Responsible for the development of plans, programs, and guidelines needed for the efficient operation of the Program throughout the TRICARE Europe Region, Dr. Schad ensured successful implementation in remote sites, non-remote sites, and non-remote distant sites.

Ms. Beauchamp is currently the TRICARE Dental Program Administrative Assistant and Analyst. Her responsibilities include analyzing a broad range of issues relating to the provision of dental services, providing ongoing customer service related training, and developing and publishing marketing material for the Program. Ms. Beauchamp also maintains the host nation dental provider listing.

Both Dr. Schad and Ms. Beauchamp work closely with United Concordia Company, INC (UCCI) to ensure all the elements of the program are effective and that our beneficiaries are receiving quality, reliable dental care. We are lucky to have such talented and dedicated staff overseeing the TRICARE Dental Program. +



*COL Larsen, Medical Director, TRICARE Europe (top photo)
Ms. Anne Beauchamp and Dr. Schad (bottom photo)*

WIC Overseas Program

*By LTC Muriel Metcalf
WIC Program Coordinator*

WIC OVERSEAS PROGRAM

The Women, Infants and Children Program (WIC) Overseas Program is rapidly preparing for Phase II. The implementation of Phase I at Baumholder, Germany and Lakenheath, United Kingdom (pilot sites) was a great success. Enrollment is running at about 60% of the projected number of participants in all OCONUS WIC programs. The MEDCOM Comptroller, COL Foxhall, recently visited the WIC office in Baumholder and advised that we probably would not see true enrollment figures until FY03.

In preparation for Phase II start-up, TRICARE-Europe, in partnership with ECJI hosted a strategic planning conference 15-16 May for all the Phase II POCs, component theater experts and representatives from the contractor, Choctaw Management/ Services Enterprise. The primary focus of the meeting was to provide information to the 12 hub POCs and guidance on the WIC office site preparation. The Pilot site POCs, MAJ (P) Jack Trowbridge, Baumholder, Germany and LtCol Hank Cashen, Lakenheath, United Kingdom shared lessons learned from getting the two sites ready. The two Army Reservists, LTC Barbara Fretwell and LTC Jenny Roper, and Maureen O'Conner, DeCA, provided briefings on the lessons learned from the actual start-up of the WIC Overseas program in Baumholder. Choctaw Management Service Enterprise (CM/SE) representatives, Matt Carp and Margaret Applewhite, discussed their roles and specific responsibilities (staffing, equipment, education, banking, policies, and procedures) as outlined in the contract.

The contract with CM/SE was signed on 24 May 2001 permitting us to move forward with Phase II. Implementation will start with the 12 largest sites in Europe then move to the smaller sites. The 12 initial sites will incorporate about 62% of the potential eligible participants. Start up of each site is dependent on the facility being ready and CM/SE identifying and getting staff hired. CM/SE is actively recruiting employees for the European theater, however, due to the Status of Forces Agreement (SOFA) for Germany the process of getting the staff hired and on the job still takes about 120 days. Schweinfurt and Spangdahlem are targeted for the first Phase II sites in Germany, once again starting the program with reservists and active duty borrowed manpower. WIC Overseas offices outside of Germany will be prioritized for implementation based on the facility being ready and CM/SE identifying and hiring staff.

Starting July 1, 2001 the WIC Overseas Programs will be switching to new income guidelines. There are three different WIC Income Eligibility Guidelines published by the United States Department of Health and Human Services (HHS) annually: (a) 48 Contiguous States, D.C., Guam and Territories, (b) Alaska and (c) Hawaii. TMA has decided to switch from the 48 Contiguous States guidelines to the Alaskan guidelines, which are significantly higher. As an example, the annual eligible income for a 2 person household will rise from \$20,813 to \$26,844 – opening the doors for many single parents and junior enlisted with a spouse who works part time. It was decided that the Alaskan income guidelines would be more equitable for the higher cost of living for families living overseas. +

Fair Winds and Following Seas

CAPT Maureen Hogan, TRICARE WIC Program Manager, is moving on to be the Executive Officer at Naval Hospital Camp Pendleton, California. She will be greatly missed. CAPT Hogan has been the driving force in keeping the WIC program in Europe on course. We wish her "calm seas and smooth sailing" in her new assignment. LTC Muriel Metcalf, Army WIC POC, has accepted the position as the TRICARE WIC Program Manager. She has been assisting CAPT Hogan for the past year, she knows the program and the challenges she faces. +



LTC Muriel Metcalf (standing) and CAPT Hogan

Open Access Project

By COL (Dr.) Robert Larsen, Medical Director

"Would you like to have an appointment today?" In the initial article on Open Access in the Oct-Dec 01 Compass, I asked how you would react if that was the first question you heard when you called your Primary Care Clinic for an appointment. I discussed the fact that seven MTFs throughout TRICARE Europe (5 Army, 1 Air Force, 1 Navy) would be working to implement "Open Access" with the goal of offering enrollees same day access, even for routine and wellness appointments. Since December 2000, the TRICARE Europe office has coordinated with expert consultants to provide training and support for primary care clinics at Butzbach, Friedburg, Heidelberg, Katterbach, Ramstein, and Sigonella, assisting them in instituting this revolutionary access model. The teams from each site have participated in multiple VTCs and two onsite conferences. All have been highly motivated and creative in addressing their unique challenges.

Since these facilities vary greatly in size and in obstacles to overcome, their degree of progress has also varied, but the result has been improvement in access for our beneficiaries with several sites having reached full open access. Many of the MHS optimization initiatives supported by TMA have been an integral part of the project. Since open access does not distinguish among various kinds of appointments, clinics have been able to reduce the number of appointment types in order to simplify the appointing process and decrease the triage requirement, thus reducing staff and patient phone time. Because continuity of care reduces demand for care by up to 15%, the clinics are working to make the PCMBN (primary care by name) initiative a reality, maximizing the opportunity for patients to see their own provider. This requires providers to accept responsibility for their enrolled panels, giving them a strong incentive to include PPIP (put prevention into practice) activities in each visit, since a healthier population will require fewer visits in the future.

BG Ursone, Lead Agent for TRICARE Europe, has attended the onsite conferences and has been closely following the progress of this program. Due to the outstanding successes at the pilot sites he is encouraging the deployment of this access model throughout TRICARE Europe. We are in the process of determining the best way for the TRICARE Europe Office to continue assisting other MTFs in this process. One important aspect of this assistance will be through systems support in data collection and analysis. A continuity of care metric, which is the first component of the TRICARE Europe "Open Access Support Tool", is now available to everyone on the TRICARE Europe website <http://131.54.120.40>

Additional tools measuring other important metrics such as demand for care, panel size, waiting times etc are under development. The provision of easily accessible, high quality care is the cornerstone of TRICARE, and the widespread institution of open access has the potential of dramatically improving the service we offer our beneficiaries. +

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The Preferred Provider Network Reception

By Tara Rigler, Public Affairs Officer, Heidelberg

The Heidelberg Hospital's 2001 Preferred Providers Network Reception was in May at the Heidelberg Hospital Dining Facility. The PPN Reception provided the opportunity for approximately 40 German and U.S. Army health care providers and medical staff to exchange information, improve provider-to-provider communication and overcome cultural barriers.

Hospital clinic representatives were present to talk to their host nation counterparts about health care practices. The majority of the German health care providers attending the reception have formal agreements with the Heidelberg Hospital to treat American patients referred to them for care.

Col. Patricia A.H. Saulsbery, Heidelberg Hospital commander, said that the reception was the first of what she hoped would be many exchanges between German and Army medical staff. "Building personal relationships between the German and Army physicians and other health care providers is an excellent way to ensure we are providing the best health care possible for the Heidelberg area," said Saulsbery. +



Dr. Paul Chupka from Heidelberg Hospital's Internal Medicine talks to his German colleague, Dr. Bernhard Kuhn, Internal Medicine, at the PPN reception

The Selected Reserve TRICARE Dental Program

Dr. George Schad, Dental Program Coordinator

On 1 Feb 2001 the TRICARE Family Member Dental Plan (TFMDP) and the TRICARE Selected Reserve Dental Plan (TSRDP) combined to become the TRICARE Dental Program (TDP). Most family members are familiar with the family member dental insurance plan that has been in existence in the United States for the past 10 years. That program was brought overseas in 1999 and now active duty family members can join the TDP and enjoy the same dental benefits OCONUS that they enjoy in the US.

Many families elect to not enroll in the TDP overseas due to the fact that they are able to receive their needed dental care in the OCONUS military dental treatment facilities for free and do not need to join the TDP. For family members who live in remote sites or who need care not available in the military dental clinics enrolling in the TDP makes a lot of sense.

In addition to bringing the TRICARE Dental Program overseas, DoD has enhanced the TRICARE Reserve Dental Program by bringing it OCONUS and by making Reserve family members eligible for the program. This Reserve dental program offers the opportunity for OCONUS Reservists and their family members to receive dental care from civilian host nation dentists. While the active duty family members and the Reserve family members are a part of the TDP, the government has a different set of premiums for different classifications of Reservists and Reserve family members. The benefit package is the same, however Reserve family members overseas have to pay some of the cost shares that the government pays for active duty family members. For this reason, reservists and their family members can go to civilian host nation providers without obtaining the standard dental non-availability and referral form except for orthodontic cases.

In the case of orthodontics, all classifications of beneficiaries need to have a non-availability and referral form issued by their local military dental clinic or the TRICARE Europe Lead Agent Office prior to beginning any orthodontic treatment. United Concordia Companies Inc. (UCCI) has published a Benefit Booklet that is available at military dental clinics or from the TRICARE Europe Office. This Booklet outlines the premiums, benefits, and other pertinent information about the TDP.

If you have any questions or concerns about the Reserve portion of the TDP, or any other aspect of the program please feel free to call the TRICARE Europe Office at DSN: 496-6358 or commercial at 49-(0) 6302-67-6358. +

Upcoming Events for TRICARE Europe

The TRICARE Europe Office is planning a number of events for August and September 2001 timeframe. Our Customer Support Services Division will be sponsoring a training workshop for our health benefits advisors, the points of contact in our remote sites, and the managed care officers from each of the facilities. This training workshop will be held the week of the 26th of August in Mainz, Germany. As the Customer Support Services Division defines the details of the workshop, information will be sent to you through your Service Managed Care Officers.

We are pleased to be able to host the "Medical Executive Skills Training: Integrating Clinical and Managerial Decisions to Improve Population Health" Course. The course is offered by USUHS and supports the Congressional mandate that current and prospective Medical Treatment Facility (MTF) Commanders receive training in health care management. With the establishment of the National Quality Management Program, medical executives are accountable for clinical effectiveness and efficiency in the use of health care resources at their facilities. This course focuses on improvement in the quality and cost efficiency of clinical practice and population health outcomes through evidence-based decision-making. The course content covers the following areas specified in the OASD (HA)-promulgated competency list for MTF Commanders:

- Decision Making
- Clinical Performance Improvement
- Health Care Delivery Systems
- Outcome Measures
- Quality Management
- Information Management
- Quantitative Analysis
- Epidemiological Methods

The course is only opened to the 05/06 level officer. We have forwarded each of the Services' quotas to the respective Managed Care Officer. Please feel free to contact your Service Managed Care Officer for additional details. The course will be offered the week of 10 September 2001.

The next scheduled meeting of the TRICARE Europe Council will be 24 and 25 September 2001 at the Ramstein Conference Center. The TRICARE Europe Council is comprised of the Commanders of the 52 Military Treatment Facilities, the Executive Steering Committee, and the Services' Dental Chiefs. We will be sending each member of the TRICARE Europe Council specific information within the next few weeks.

As we plan for these events, we work hard to ensure we are meeting the needs of our customers - YOU! Please provide us any suggestions you may have regarding additional training opportunities you would like to see offered.

The 2001 TRICARE Europe Benefits Workshop

“Rowing through the Currents of Change”

WHERE & WHEN. At the Hyatt Regency in Mainz Germany 27-30 August 2001, with travel days being 26 and 31 August.

INTENDED AUDIENCE. The men and women throughout TRICARE Europe who interface directly with our beneficiaries on a daily basis – Health Benefits Advisors, Beneficiary Counseling and Assistance Coordinators, Debt Collection Assistance Officers, Medical Service Coordinators, Managed Care Officers, and remote site Points of Contact.

THEME/GOAL. Acknowledging that the environment in which we operate is characterized by constant change and to highlight the importance of teamwork, our Workshop theme is “Rowing through the currents of change.” The overarching goal of the workshop is to provide the tools, skills, and knowledge these folks need in assisting our beneficiaries.

AGENDA. The details of the agenda are still being worked, but topics will include an overview of the TRICARE benefit and updates on various current issues. We have invited guest speakers from the TRICARE Management Activity (East and West), Wisconsin Physician Services, and other agencies. The TRICARE Europe staff will also present updates and discussions on various topics. The use of the term “Workshop” versus “Conference” is intentional; we envision the majority of the presentations to be interactive to include discussion and case study – we will avoid “death by Powerpoint.”

FUNDING. TRICARE Europe will provide the funding for travel, hotel, and per diem for all authorized Workshop attendees. Hotel charges will be paid centrally, so attendees will not pay the hotel directly for room charges – of course any additional charges such as additional persons, phone calls, restaurant/bar charges, etc. will be the responsibility of the attendee. Breakfast and lunch are included in the package we’ve negotiated with the Hotel; all attendees will be paid the Meals & Incidental Per Diem Rate less the portion for breakfast and lunch. Certain charges, such as rental cars, will not be authorized. All attendees flying into Frankfurt IAP should take the local train to Mainz (approximately 20 kilometers), taxi fares are very expensive and will normally not be reimbursed. Once registrations are received, the TRICARE Europe Office will send fund-cite authorizations to applicable units.

QUOTAS. We have developed quotas for each MTF and for the remote sites. The quotas have been provided to the Services’ Managed Care Officers and directly to the Points of Contact at remote sites. Again, the target audience is the people who face our beneficiaries on a daily basis – we will monitor the registrations to ensure only people in appropriate positions register for the conference. We will contact the applicable Service Managed Care Officer if we see any potentially inappropriate registrations. Additional quotas will probably not be available, but identify any additional requirements and we will distribute any “fall-out” on a first-come, first-served basis.

REGISTRATION. Registration will be done on-line at the Workshop website. Go to TRICARE Europe’s website (webmaster.europe.tricare.osd.mil) and select the link for the Workshop, then click on “Attendee Registration.”

ATTIRE. Business casual (Collared shirts, no blue jeans or shorts)

MORE INFORMATION. Contact MSgt Ron Peoples, Ms. Uli Engel, or Major Tom Haines at DSN 496-6320, Commercial +(0)6302-67-6320 or by email at ronald.peoples@sembach.af.mil, ulrike.engel@sembach.af.mil or tom.haines@sembach.af.mil.

TRICARE EUROPE EXECUTIVE STEERING COMMITTEE

Brig Gen Richard Ursone (Lead Agent & Chair) .. Comd Surg, USAREUR
Colonel (Dr.) Thomas J. Loftus..... Command Surgeon, HQ USAF
CAPT (Dr.) Thomas K. Burkhard..... Fleet Medical Off, CINCUSNAVEUR
CAPT (Dr.) Richard B. Hall II..... Cmd Surgeon, HQ USEUCOM/ECMD
CAPT Phil Barnett..... Chair, MTF Commanders Council
CAPT Jack Bowers..... Chair, Dental Advisory Committee
CAPT(Dr.) Fanancy Anzalone..... MTF Representative
Colonel (Dr.) Courtney Scott..... MTF Representative
COL David Rubenstein..... MTF Representative

TRICARE EUROPE STAFF CHANGES

Welcome to.....

.....LCDR Steve Keener, working in the Customer Support Services Division on Remote Site Healthcare.

.....LTC Muriel Metcalf, TRICARE WIC Program Manager.

Farewell to.....

.....CAPT Maureen Hogan, who is PCSing to Naval Hospital, Camp Pendleton, California.

.....Ms. Christine Ribble, who is moving to Albuquerque, NM.

.....Mr. Daryl Kanter, who is moving to Little Rock, AR.

.....SPC Jason Tyson, who has transferred to the Family Practice Clinic at Landstuhl Regional Medical Center.

Congratulations to..... LCDR Steve Keener on his selection to CDR.

TRICARE EUROPE OFFICE STAFF

CAPT Cindy DiLorenzo
SFC Darrell Kelley
COL (Dr.) Robert Larsen
Lt Col Elizabeth Robison
CAPT Rod Fierek
CPT Eric Edwards
Maureen Sherman
K.C. Collins
Sonny Bowen
Maj Tom Haines
MSgt Ron Peoples
LCDR Steve Keener
Uli Engel
Martin Hollingworth
Sean Glover
Shane Pham
Harry Raith
LTC Beatrice Stephens
DeAnn Haase
1Lt Derrick Eckley
Terry Taylor
Arthur Pedersen
Mark Judson
Dr. George Schad
Anne Beauchamp
Heidi Watson
Marcela Duris
LTC Muriel Metcalf

Deputy Director
Superintendent, Admin Services
Medical Director
Director, Population Health
Population Health
Director, Operational Mgmt Support
Breast Health Program Coordinator
Budget Officer
Contracting Officer
Director, Customer Support Svcs
Deputy Director, Customer Services
Director, Remote Site Healthcare
Customer Support Services
Customer Support Services
Customer Support Services
Customer Support Services
Director, Health Plan Analysis
Data Analyst
Chief Information Officer
LAN Administrator
Web Administrator
Data Analyst
Dental Program Coordinator
Dental Program Assistant
Executive Secretary
Administrative Assistant
WIC Program Manager



TRICARE EUROPE
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OFFICIAL BUSINESS

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ADDRESSEE: Please e-mail address corrections/updates to TRICARE Europe at teo.pao@sembach.af.mil